

**FILED EFFECTIVE  
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<p>No. <b>W 63316</b></p>	<p>Reinstatement Annual Report Form <b>ADMIN DISSOLVED 09/08/2009</b></p>	<p>2. Registered Agent and Office (<b>NOT A P.O. BOX</b>) TRENT BOTT 289 N 700 W BLACKFOOT ID 83221</p>																					
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>	<p>1. Mailing Address: Correct in this box if needed.</p> <p>BOTT PLUMBING LLC TRENT BOTT <del>PO BOX 247</del> <b>289 N 700 W</b> <del>MORELAND ID 83256</del> <b>Blackfoot Id 83221</b></p>	<p>3. New Registered Agent Signature.</p>																					
<p><b>REINSTATEMENT FEE DUE: \$30.00</b></p>	<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">Office Held</th> <th style="width:20%;">Name</th> <th style="width:30%;">Street or PO Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Country</th> <th style="width:10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Shelly Bott</td> <td>289 N 700 W</td> <td>Blackfoot Id</td> <td>USA</td> <td></td> <td>83221</td> </tr> <tr> <td>Owner</td> <td>Trent Bott</td> <td>289 N 700 W</td> <td>Blackfoot Id</td> <td>USA</td> <td></td> <td>83221</td> </tr> </tbody> </table>		Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Owner	Shelly Bott	289 N 700 W	Blackfoot Id	USA		83221	Owner	Trent Bott	289 N 700 W	Blackfoot Id	USA		83221
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<p>5. Organized Under the Laws of:  <b>IDAHO W 63316</b></p>	<p>6.</p> <p>Signature: <u>Shelly Bott</u> Date: <u>9-28-09</u></p> <p>Name (type or print): <u>Shelly Bott</u> Title: <u>Owner</u></p>																						
<p>Issued 09/17/2009 by CLH</p>																							